

DISCHARGE MONITORING REPORT (DMR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: P4 PRODUCTION LLC
ADDRESS: P.O. BOX 816
 SODA SPRINGS, ID 83276

FACILITY: P4 PRODUCTION LLC
LOCATION: 1853 HIGHWAY 34
 SODA SPRINGS, ID 83276

ATTN: SHELDON ALVER, PLANT MANAGER

ID0001198	001-A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD	
MM/DD/YYYY	MM/DD/YYYY
05/21/2014	06/20/2014

DMR Mailing ZIP CODE: 83276
 MINOR
 (SUBR 03)

External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. fahrenheit	SAMPLE MEASUREMENT	*****	*****	*****	*****	74	82				
00011 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY AV	Req. Mon. DAILY MX	deg F		Daily	GRAB
Thermal Discharge	SAMPLE MEASUREMENT	*****	1099.1		*****	*****	*****	*****			
00017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	1320 DAILY MX	MBTU/d	*****	*****	*****	*****		Daily	CALCTD
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2881809	3079494		*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	Req. Mon. DAILY MX	gal/d	*****	*****	*****	*****		Continuous	CONTIN

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA Code
				MM/DD/YYYY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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MM/DD/YYYY	MM/DD/YYYY
06/21/2014	07/20/2014

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 (SUBR 03)

External Outfall

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. fahrenheit	SAMPLE MEASUREMENT	*****	*****	*****	*****	77	83				
00011 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY AV	Req. Mon. DAILY MX	deg F		Daily	GRAB
Thermal Discharge	SAMPLE MEASUREMENT	*****	1183.5		*****	*****	*****	*****			
00017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	1320 DAILY MX	MBTU/d	*****	*****	*****	*****		Daily	CALCTD
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	2936108	3161936		*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	Req. Mon. DAILY MX	gal/d	*****	*****	*****	*****		Continuous	CONTIN

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07/21/2014	08/20/2014

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. fahrenheit	SAMPLE MEASUREMENT	*****	*****	*****	*****	74	82				
00011 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****	*****	*****	Req. Mon. DAILY AV	Req. Mon. DAILY MX	deg F		Daily	GRAB
Thermal Discharge	SAMPLE MEASUREMENT	*****	1145.5		*****	*****	*****	*****			
00017 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	1320 DAILY MX	MBTU/d	*****	*****	*****	*****		Daily	CALCTD
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	3023691	3136977		*****	*****	*****	*****			
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	Req. Mon. DAILY MX	gal/d	*****	*****	*****	*****		Continuous	CONTIN

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